HIGH-RISK ACTIVITIES WORKSHEET						DATE
I. INDIVIDUAL DATA INFORMATION (To be filled in by the individual and sent to Commander)						
GRADE/NAME (Last, First, Middle Initial) AGI			UNIT/OFFICE		DUTY PHONE	
LIST HIGH RISK ACTIVITIES (Flying civilian aircraft, hang gliding, sky diving, parasailing, whitewater rafting, motorcycle and auto racing, scuba diving, bungee jumping, and other similar activities)						
DATE OF LAST PARTICIPATIO	N (If annlicable)	FREO LIEN	CY OF PARTIC	ΙΡΔΤΙΩΝ		
DATE OF LAST PARTICIPATIO	м (ІІ арріісавіе)		VEEKLY	MONTHLY	SEASO	NAL OCCASIONAL
IDENTIFY PREVIOUS EXPERIENCE	CE	-	-			
IDENTIFY SPECIALIZED TRAINING REQUIRED/COMPLETED FOR THIS ACTIVITY LOCATION/AREA WHERE ACTIVITY WILL OC address & phone number)						LL OCCUR (i.e. business, location, name,
			auuress	х риоте патьег)		
II. COMMANDER'S REVIEW AND BRIEFING SECTION						
BRIEFING INSTRUCTIONS. Commanders should discuss training, experience, use of safety equipment, rules, and precautions with personnel participating in high-risk activities. This risk assessment is not intended to prohibit personnel from participating in high-risk activities, but to ensure they are familiar with the hazards and injury potential of these activities. Commanders should ensure personnel wishing to participate in high-risk activities use appropriate safety measures. If commanders determine these personnel are inadequately trained or inexperienced and (or) a threat to safety and the mission exists, they must prohibit these personnel from participating in the activity. However, the commander's role in safety does not replace the individual's responsibility. The individual must exercise sound judgment and self-discipline and not put life, limb, or the performance of his or her Air Force duties in jeopardy.						
PRECONDITIONS AGREED UPON DURING BRIEFING (i.e., specific location, special equipment, medical screening)						
HAZARDS OF THE ACTIVITY (List them)						
SIGNATURE OF MEMBER						DATE
APPROVED DISAPPROVED	SIGNATURE OF COMMANDER					DATE